

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Committee for Maryland's Progress		FEC IDENTIFICATION NUMBER ▼ C C00592683	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Brass Tactics Solutions X *			Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 28 / 2016		
Mailing Address 1140 Connecticut Ave NW Ste 800			Amount 1725.00		
City Washington	State DC	Zip Code 20036-4010	Transaction ID : VQZT2A73EJ7		
Purpose of Expenditure Estimated Cost for Paid Canvassing Services 3/28-3/31		Category/ Type 001	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate CHRIS VAN HOLLEN			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 16444.94			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MD Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Julie Brown X *			Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 28 / 2016		
Mailing Address 3131 Connecticut Ave NW			Amount 400.00		
City Washington	State DC	Zip Code 20008-5000	Transaction ID : VQZT2A73EM2		
Purpose of Expenditure Estimated Cost for Canvassing Services 3/28-3/31		Category/ Type 001	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate CHRIS VAN HOLLEN			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 16444.94			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MD Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Nicholas Leonardi

[Electronically Filed]

Date

MM / DD / YYYY
03 / 30 / 2016

Signature